1911,12,15,17:18

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

108 30 140

CLAIMS AS FILED - PART I SMALL ENTITY												
			S FILED (Column		(Column 2)			SMALL ENTITY TYPE		OR	OTHER SMALL	
TO	OTAL CLAIMS		18					RATE	FEE	1	RATE	FEE
FC	PR /		NUMBER FILED		NUMBER EXTRA		·	BASIC FEE	385.00	OR	BASIC FEE	770.00
TC	TAL CHARGE	ABLE CLAIMS	/8 minus 20=		• 0			XS 9=		OR	XS1.8=	
INE	EPENDENT C	LAIMS	7 m	inus 3 =	4			X43=		OR	X86=	344
ML	ILTIPLE DEPE	NDENT CLAIM P	RESENT					+145=		OR	+290=	·
* If the difference in column 1 is less than zero, enter "0" in column 2							1	TOTAL		OR	TOTAL	1114
CLAIMS AS AMENDED - PART II										3	OTHER	THAN
09	108/06	(Column 1)	,	(Colun				SMALL		OR	SMALL	ENTITY
AMENDMĘNT A	•	CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIC PAID I	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	- 18	Minus	- 2	0 .	-01		X\$ 9=		OR	X\$18=	~
AME	Independent	• 7	Minus	7	01.4144	- 9		X43=		OR	X86=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+145=		OR	+290	
	•	•					į	TOTAL			TOTAL	
	٠							ADDIT. FEE			ADDIT. FEE	
	-	(Column 1)	1	(Colun		(Column 3)						
AMENDMENT B		REMAINING AFTER AMENDMENT		NUME PREVIO	BER JUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus			=		X\$ 9=	·	OR	X\$18=	
	Independent			CL AIM	-	\prod	X43=.		OR	X86=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							, L	+145=		OR	+290=	
								TOTAL DDIT, FEE		OR	YOYAL ADDIT, FEE	
		(Column_1)		(Colum		(Column 3)						•
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT	,	HIGHE NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	••		=		X\$ 9=		OR	X\$18=	•
¥	independent		Minus	***		=	lt	X43=			X86=	·
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=		OR		
• #	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+290=	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										OR ,	TOTAL DDIT. FEE	
		nber Previously Paid					r tour	nd in the app	ropriate box	in cot	дпл 1.	